

NATIONAL Assessment Centre Services [ver 1 Jan 05]

Job No	Job description	Date & Time Completed	Done by
10/12/18	SAS e-filing		
NA/INC18022131/13	E-mail (Within 3hrs, AIC 2hrs)		
649936B	I-Motor Claim Form	12/10/23 266 -	002
09/12/18 1140	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
IP (Reporting Only)	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Control Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

Particulars: Vch No: 52K8808J INC () / Non-INC ()

Owner / Driver: () Tel: ()

Key No: () Period: () Cover Type: ()

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Access: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:

Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repaler.

Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Item	INC Routine: 6788 6616	Date & Time Completed	Done by
Apply for Transport Allowance () / Courtesy Car ()			
C Check / Post Repair Inspection ()			
Upload Resurvey Photo [Repair Cost > \$3000] ()			

Time	Actions

Customer's Particulars	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
Owner	TR Bill	TR Bill	Wad Bill
NA1808103	1) AR: Accident Reporting (\$30)		
	2) DA: Damage Assessment (\$100); INC (\$80)		
	3) TP: Towing Fee \$40/\$45		
	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wof 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*N5: Courtesy Car / Tpl Allowance \$3		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$3		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idao Mobile \$0		
Checked by (Bug-In-Charge):	Invoice dated	Fee Charged	
Owner's Comments:	Invoice dated	Fee Charged	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	10/12/2018 14:21
Date Of Accident	09/12/2018 11:40
Exact Location Of Accident	ALONG SEMBAWANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY9936B
Insured/Policyholder	
Name Of Registered Owner	WHEELS4YOU
Co Reg No	53340926L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98266221

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	L300
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5089099539-01
Cover Note Number	

Driver

Name of Driver	SHEIKH MOHSEN BIN MUNIR BAHASWAN
NRIC No	S8537288B
Date Of Birth	06/11/1985
Occupation	OUTDOOR
Date Of Driving Pass	07/03/2008
Driving Experience	10 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98266221
Fax Number	
Contact Number	
Email Address	SMOHSENBAHASWAN@YAHOO.COM

Address	BLK 423 TAMPINES ST 41
	#07-176
Postcode	520423
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING STRAIGHT ALONG SEMBAWANG ROAD ON THE 2ND LANE OF A3-LANES RD. INFRT OF MY VEH STOP DUE TO THE RED TRAFFIC LIGHT AHEAD. I HAVE NOT ENOUGH TIME TO REACT AND MY VEH HIT ONTO THE REAR PORTION OF VEH B.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	HAVEN'T RETRIEVE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLK8808J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SUAN LAY KHIM
NRIC/Passport Number	S7923439G
Contact Number	81682725
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

WHEELS 4 YOU

REG NO: 53340926L

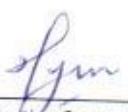
BLK 423 TAMPINES ST 41

SINGAPORE 620423

TEL: 9826 6221

EMAIL: smohsenbahashwan@yahoo.com

 10/12/18
Driver's Signature
(If driver is not the policyholder)
Date & Time:

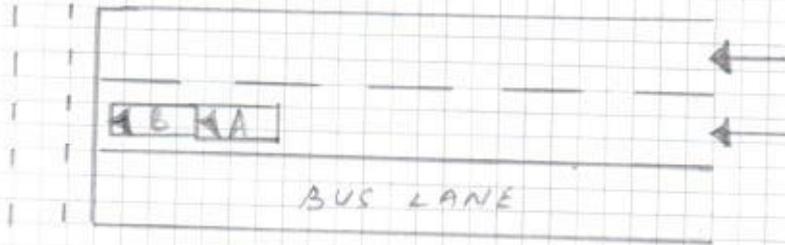
 10/12/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

SEMBAWANG RD

A - GY9936B

B - SLK8808J



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls refer to the statement.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

WHEELS 4 YOU

REG NO: 53340926L

BLK 423 TAMPINES ST 41

SINGAPORE 520423

TEL: 9826 6221

EMAIL: smohsenbahashwan@yahoo.com

[Signature] 10/12/18
Driver's Signature
(If driver is not the policyholder)

Date & Time:

[Signature] 10/12/18
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number **S8537288B**
 Name
SHEIKH MOHSEN BIN MUNIR BAHASHWAN

Birth Date **06 Nov 1985**
 Issue Date **10 Mar 2009**

001717936K



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8537288B



Name
SHEIKH MOHSEN BIN MUNIR BAHASHWAN
 شيخ محسن بن منير باحشوان

Race
ARAB

Date of birth **06-11-1985** Sex **M**

Country of birth
SINGAPORE




YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg

ISSUE DATE
07 Mar 2009

NP428A

License No: S8537288B



4430850



NRIC No **S8537288B**



Date of issue
30-06-2009

Address
**APT BLK 423 TAMPINES STREET 41
 #07-176
 SINGAPORE 520423**

Hello, NAC_PAYA_UBI_800601

Change Language Change Password Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.

Vehicle No. (For Motor)

Date of Accident

Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5089099539-01		WHEELS4YOU	53340926L	GCV	Third Party, Fire & Theft	GY9936B	GY9936B	21/04/2018	20/04/2019

Continue

Claim Handling

Accident MT/1023266

Policy No.	5089099539-01	Vehicle No.	GY9936B	GST Registration No.
Certificate No.				
Policyholder Name	WHEELS4YOU			Policyholder NRIC
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Third Party, Fire & Theft	Loading
Contact No.(Mobile)	98266221	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	10	Private Hire

Accident Details

Report Date	10/12/2018 17:45	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	09/12/2018	Time of Accident hh:mm	11:40	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG SEMBAWANG ROAD			

Excess

Own damage Excess	0.00	Additional Excess	
Unnamed Driver Excess		Outside Singapore OD Excess	Windscreen Excess
Third Party Excess	0.00	Outside Singapore TP Excess	

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 423 #07-176	Address 2	TAMPINES STREET 41	Address 3
Address 4	SINGAPORE 520423	Address Type	Singapore address	Post Code
Unit No.	07-176	Related Policy Number	5089099539-01	

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	SHEIKH MOHSEN BIN MUNIR B	Driver NRIC	S8537288B	Driving Experience
Register Date of Driver License	07/03/2008	Driver Age	33	Contact No.(Home)
Contact No.(Mobile)		Contact No.(Office)		Address 3
Address 1	BLK 423 #07-176	Address 2	TAMPINES STREET 41	Post Code
Address 4	SINGAPORE 520423	Address Type	Singapore address	
Unit No.	07-176			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Com

Declaration			
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Modification History

Claim 002 OD-MX **New**

Claim Type *	OD-MX	Insured Name	WHEELS4YOU
Contact No.(Mobile)	98266221	Contact No. (Home)	
Email Address		Vehicle Number	GY9936B
Claim Description	GY9936B / SLK8808J ON 9 Dec 2018		
Preferred Workshop Finalisation	Yes	Insured Liability	Fully at Fault
Date Registered		Preferred Repair Option	Preferred Workshop, Name unknown
Report Taken By		GIA report	Received
<input checked="" type="checkbox"/> Print AK letter		Claim Close Date	10/12/2018 18:04
		Workshop Repairer	ROSLINDA

Save Submit

Attachment

Accident No. MT/1023266 Claim No. 002
 Last Doc. Received Yes No Upload Date 10/12/2018 00:00

- Choose File No file chosen
- Message Read

Path *

Category *	Confidential
<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Clear"/> Please Select	NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Dec 2018 18:04		NRIC/ Driving License	Normal	NRIC/ Driving L
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Dec 2018 18:04		SAS	Normal	SAS 20
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Dec 2018 18:03		Photos	Normal	Photos :
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Dec 2018 18:03		Photos	Normal	Photos :
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Dec 2018 18:03		Photos	Normal	Photos :
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Dec 2018 18:03		Photos	Normal	Photos :
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Dec 2018 18:03		Photos	Normal	Photos :
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Dec 2018 18:03		Photos	Normal	Photos :

Video List

Uploaded By/Date	Folder Date	File Name
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